REQUEST FOR ALTERNATE PROCUREMENT

Total Estimated Cost				2. PR/DO or other Number (A	PR/DO or other Number (Attach document)		3. RAP Number				
4.	4. If Single Source, Contractor's Name and Address					Date Required	Requesting Departr	ment			
					6.	Preparer's Name		Phone (907)			
7.	. Type of request for exemption from competitive solicitation requirements.										
	A.		Single Source: AS 36.30.300 / 2 AAC 12.410								
	B.	B. Limited competition: AS 36.30.305 / 2 AAC 12.430									
	C.										
	D.										
	E.		Innovative Proc	novative Procurement. AS 36.30.308 / 2AAC 12.575-577							
8.	Expl	lanatio	consisting accurate. I	ns of exemptions under A, B, o of material facts, sufficient to in Factual evidence may consist on proving that the findings of factual evidence should be included.	ndepe of writ ot are	ndently determine ten documents, rec true and accurate.	that the findings of fac ords, supporting data, Itemized listings of fin	t listed are true and affidavits, or other			
9.	Department Head or Authorized Representative Name and Title (typed or printed)					I certify to the best of my knowledge and belief, that all the information on this request, including any attachment, is true and					
	кер	resem	lative Name and	Title (typed of printed)		curate.	quest, including any at	lachment, is true and			
						Signatu	re	Date			
DEPARTMENT OF ADMINISTRATION / DIVISION OF GENERAL SERVICES											
10.		Approv	ved 🔲 🗅	Disapproved		Returned for Furthe (See back)	er Justification	Date			
Chi	ef Pro	ocurer	nent Officer					Date			

REQUEST FOR ALTERNATE PROCUREMENT - BACK

Your request is returned for further justification.											
Department of Administr	ration comments and recomme	endations:									
Recommended:	☐ Approved	☐ Disapproved	☐ Other								
Recommended:	☐ Approved	☐ Disapproved	☐ Other								
Recommended: Signature	☐ Approved	☐ Disapproved Reviewed By									

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